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\*\* CONTINUING DATA \*\*\*\*\* *None Pat*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None Pat*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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|   |  |                           |                        |                       |                            |
|---|--|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br><i>Signature</i><br>Examiner's Signature Initials | STATE OR<br>COUNTRY<br>NY | SHEETS<br>DRAWING<br>2 | TOTAL<br>CLAIMS<br>35 | INDEPENDENT<br>CLAIMS<br>1 |
|---|--|---------------------------|------------------------|-----------------------|----------------------------|

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## TITLE

Anthracene derivative host having ranges of dopants

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| FILING FEE | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
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